

ROUTING RECORD			
DATE	FROM	TO	ACTION
DEC 2 2010	RG	CSB	40
3/2/11	CSB	RG	Approved 40
MAR 9 2011	RG	P/S	612357
REFERENCE TO OTHER APCD RECORDS INCLUDING VARIANCES			

BETA OFF SHORE OCS LEASE PARCELS P300/P301 HUNTINGTON BEACH CRUDE OIL & NAT GAS PRODUCTION <i>Emerg. gce</i>	APPL # 516022 I.D. # 166073 Date: 11/02/10
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See the Lead A/N 516016

D78



South Coast Air Quality Management District

Form 400-CO**Application For Change Of Operator**Mail Application To:
SCAQMD
P.O. Box 4944
Diamond Bar, CA 91765Tel: (909) 396-3385
www.aqmd.gov**Note:** A Change Of Operator Permit can only be issued if BOTH of the following conditions apply:

- ➔ ① The existing permit is still active or can be reinstated to an active status; AND
② The equipment is operated at the same location as listed in the existing permit.

Section A: Previous Operator's Information	
1. Business Name of Operator <u>As It Appears</u> on the Permit: Pacific Energy Resources, Ltd.	2. Current AQMD Facility ID# (Available on Permit or Invoice issued by AQMD): 151178 166073
Section B: New Operator's Information	
3. Business Name of Operator <u>As It Should Appear</u> on the Permit: Beta Offshore	
4. Owner's Business Name (If different from Business Name of Operator):	
Section C: Equipment Location Address	
5. Equipment Site Location Address: (For equipment operated at various locations in AQMD's jurisdiction, provide address of initial site) OCS Lease Parcels P300/P301 (Federal Waters) Street Address City: CA, State: Zip Code: County: <input type="radio"/> Los Angeles <input type="radio"/> Orange <input type="radio"/> San Bernardino <input type="radio"/> Riverside Contact Name: Marina Robertson Contact Title: HSE Manager Phone: (562) 628-1526 Fax: (562) 628-1536 E-Mail: mrobertson@betaoffshore.c	
Section D: Permit Mailing Address	
6. Permit and Correspondence Information: <input type="checkbox"/> Check here if same as equipment location address 111 West Ocean Blvd., Ste. 1240 Street Address City: Long Beach CA 90802 State: Zip Code: Contact Name: Marina Robertson Contact Title: HSE Manager Phone: (562) 628-1526 Fax: (562) 628-1536 E-Mail: mrobertson@betaoffshore.c	
Section E: Facility Business Information	
7. What business is conducted at this equipment site location? Crude Oil and Natural Gas Production	8. What is your primary NAICS Code (North American Industrial Classification System)? 211111
9. Are you a small business as per AQMD's Rule 102 definition (10 employees or less and total gross receipts are \$500,000 or less or a not-for-profit training center)? <input checked="" type="radio"/> No <input type="radio"/> Yes	
Section F - Information on Permit to be Transferred to New Operator	
10. Is this Change of Operator a full or partial transfer of all active permits? <input checked="" type="radio"/> Full <input type="radio"/> Partial	
FOR NON-RECLAIM APPLICATION	
11. Application number:	13. For RECLAIM Facilities: Also submit Form 2007-1, Form 2007-2 and if applicable, Form 2007-3, together with a separate filing fee for the transfer of RTC's as per Rule 301(0)(9). Device number or range of device numbers for the permitted item: D78 Please be advised that you are applying to take over the operation of all or part of a RECLAIM facility and if any previous Facility Permit holder is found to have violated AQMD Rule 2004(d) - Prohibition of Emissions in Excess of Annual Allocation, during time periods prior to this change of operator, your facility Allocation will be reduced by the amount of excess emissions, as provided under Rule 2010(b)(1).
12. Permit Number: (Please attach a copy)	
Section G - Signature and Authorization for Change of Operator	
I HEREBY AGREE TO TRANSFER OWNERSHIP OF THE PERMITTED EQUIPMENT AS SPECIFIED ABOVE, FOR THIS FACILITY, TO THE NEW LEGAL OPERATOR, IDENTIFIED IN SECTION B.	
Previous Operator	14. Signature of Responsible Official: <i>[Signature]</i> 15. Title of Signer: VP and Manager of Beta Operations
New Operator	16. Date: 5-14-10 17. Phone: (562) 628-1526 18. Signature of Responsible Official: <i>[Signature]</i> 19. Title of Signer: Executive VP and Chief Optg Officer 20. Date: 5-17-10 21. Phone: (562) 628-1526
Checklist <input checked="" type="checkbox"/> Form signed? <input checked="" type="checkbox"/> Payment attached? <input checked="" type="checkbox"/> Copy of existing permit attached? 11/24/10	

AQMD USE ONLY	APPLICATION/TRACKING 516022	TYPE B D	EQUIPMENT CATEGORY CODE 043502010	FEE SCHEDULE \$	VALIDATION 7/28/10
ENG. DATE 9-12-10	ENG. DATE 9-12-10	CLASS D	ASSIGNMENT Unit D Engineer CSB	CHECK/MONEY ORDER 2242	AMOUNT 1790430
© South Coast Air Quality Management District, Form 400-CO (2007.03)			Tracking # 90903		

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S.C.A. Q.M.D.
REVENUE RECEIVING

10 NOV 23 A10:38

10 NOV 24 A10:55

S.C.A. Q.M.D.
ENGINEERING

~~10 JUL 28 A11:10
S.C.A. Q.M.D.
PERMIT PROCESSING~~

~~10 NOV -4 A8:37~~

S.C.A. Q.M.D.
ENGINEERING

SCAQMD PERMIT PROCESSING SYSTEM (PPS)

FEE DATA - SUMMARY SHEET

Application No : 516022

Previous Application No: 466174

IRS/SS No:

Previous Permit No: F91735

Company Name : BETA OFF SHORE

Facility ID: 166073

Equipment Street: OCS LEASE PARCELS P300/P301, HUNTINGTON BEACH CA 92648

Equipment Desc : I C E (>500 HP) EM ELEC GEN DIESEL

Equipment Type : BASIC

Fee Charged by: B-CAT

B-CAT NO. : 043902

C-CAT NO: 00

Fee Schedule: B

Facility Zone : 18

Deemed Compl. Date: 12/2/2010

Public Notice: NO

Evaluation Type : CHANGE OF OPERATOR (PO)

Small Business: ☐

Disposition : Approve PO, Recommended by Engineer

Higher Fees for Failing to Obtain a Permit: ☐

Lead Appl. No :

Identical Permit Unit: ☐

Air quality Analysis		\$0.00	Filing Fee Paid:	\$0.00
E.I.R		\$0.00	Permit Processing Fee Paid:	\$501.26
Health Risk Assessment		\$0.00	Permit Processing Fee Calculated*:	\$501.26
Significant Project		\$0.00	Permit Processing Fee Adjustment:	\$0.00
Expedited Processing	Hours: 0.00	\$0.00		
Source Test Review	Hours: 0.00	\$0.00		
Time & Material	Hours: 0.00	\$0.00		
			Total Additional Fee:	\$0.00
			Additional Charge:	\$0.00

COMMENTS:

RECOMMENDED BY: C S BHATT

DATE: 02/17/2011

REVIEWED BY: _____

DATE: MAR 9 2011

* ADJUSTED FOR SMALL BUSINESS, IDENTICAL EQUIPMENT AND P/O NO P/C PENALTY

SCAQMD PERMIT PROCESSING SYSTEM (PPS)

AEIS DATA SHEET

Company Name : BETA OFF SHORE

Facility ID : 166073

Equipment Address : OCS LEASE PARCELS P300/P301

HUNTINGTON BEACH CA 92648

Application Number : 516022

Equipment B-Cat : 043902

Estimated Completion Date : 02/17/11

Equipment C-Cat :

Equipment Type : Basic

Equipment Description : I C E (>500 HP) EM ELEC GEN DIESEL

Emittants	Emissions	
	R1 LB/HR	R2 LB/HR
CO	1.50	1.50
NOX	12.03	12.03
PM10	0.34	0.34
ROG	0.21	0.21
SOX	0.56	0.56

Applicable Rules

1110.2	07/09/2010	Emissions from Gaseous and Liquid-fueled Engines
1171	05/01/2009	Solvent Cleaning Operations
1173	02/06/2009	Fugitive Emissions of VOC
1183	03/12/1993	Outer Continental Shelf (OCS) Air Regulations
2001	05/06/2005	Applicability (RECLAIM)
2002	01/07/2005	Allocations for NOx and SOx (RECLAIM)
2004	04/06/2007	Requirements
2005	05/06/2005	New Source Review for RECLAIM
2012	05/06/2005	Requirements of MRR for NOx Emissions (RECLAIM)
401	11/09/2001	Visible Emissions
402	05/07/1976	Nuisance
404	02/07/1986	Particulate Matter - Concentration
431.2	09/15/2000	Sulfur Content of Liquid Fuels

	Mon	Tue	Wed	Thu	Fri	Sat	Sun
Daily Start Times :	08:00	00:00	00:00	00:00	00:00	00:00	00:00
Daily Stop Times :	09:00	00:00	00:00	00:00	00:00	00:00	00:00

User's Initials : CB05

Date: 02/17/11

Supervisor's Name :

Review Date : / /

NSR DATA SUMMARY SHEET

Application No: 516022
Application Type: Change of Ownership
Application Status: PENDAPPRV
Previous Apps, Dev, Permit #: 466174, 0 - , , NONE

Company Name: BETA OFF SHORE
Company ID: 166073
Address: OCS LEASE PARCELS P300/P301, HUNTINGTON BEA
RECLAIM: NOX
RECLAIM Zone: 01
Air Basin: SC
Zone: 18
Title V: NO

Device ID: 0 -
Estimated Completion Date:
Heat Input Capacity: 0 Million BTU/hr
Priority Reserve: NONE - No Priority Access Requested
Recommended Disposition: 31 - PERMIT TO OPERATE GRANTED
PR Expiration:
School Within 1000 Feet: NO
Operating Weeks Per Year: 13
Operating Days Per Week: 1
Monday Operating Hours: 08:00 to 09:00
Tuesday Operating Hours: 00:00 to 00:00
Wednesday Operating Hours: 00:00 to 00:00
Thursday Operating Hours: 00:00 to 00:00
Friday Operating Hours: 00:00 to 00:00
Saturday Operating Hours: 00:00 to 00:00
Sunday Operating Hours: 00:00 to 00:00

Emittant: CO
BACT:
Cost Effectiveness: NO
Source Type: MINOR
Emis Increase: 0
Modeling: N/A
Public Notice: N/A
CONTROLLED EMISSION
Max Hourly: 1.5 lbs/hr
Max Daily: 1.5 lbs/day
UNCONTROLLED EMISSION
Max Hourly: 1.5 lbs/hr
Max Daily: 1.5 lbs/day
CURRENT EMISSION
BACT 30 days Avg: 0 lbs/day
Annual Emission: 19.5 lbs/yr
District Exemption: None

Emittant: NOX
BACT:
Cost Effectiveness: NO
Source Type: MAJOR
Emis Increase: 0
Modeling: N/A
Public Notice: N/A
CONTROLLED EMISSION
Max Hourly: 12.03 lbs/hr
Max Daily: 12.03 lbs/day
UNCONTROLLED EMISSION
Max Hourly: 12.03 lbs/hr
Max Daily: 12.03 lbs/day
CURRENT EMISSION
BACT 30 days Avg: 0 lbs/day
Annual Emission: 156.39 lbs/yr
District Exemption: None

Emittant: PM10
BACT:
Cost Effectiveness: NO
Source Type: MINOR
Emis Increase: 0
Modeling: N/A
Public Notice: N/A
CONTROLLED EMISSION
Max Hourly: 0.34 lbs/hr
Max Daily: 0.34 lbs/day
UNCONTROLLED EMISSION
Max Hourly: 0.34 lbs/hr
Max Daily: 0.34 lbs/day
CURRENT EMISSION
BACT 30 days Avg: 0 lbs/day
Annual Emission: 4.42 lbs/yr
District Exemption: None

Emittant: ROG
BACT:
Cost Effectiveness: NO
Source Type: MINOR
Emis Increase: 0
Modeling: N/A
Public Notice: N/A
CONTROLLED EMISSION
Max Hourly: 0.21 lbs/hr
Max Daily: 0.21 lbs/day
UNCONTROLLED EMISSION
Max Hourly: 0.21 lbs/hr
Max Daily: 0.21 lbs/day
CURRENT EMISSION
BACT 30 days Avg: 0 lbs/day
Annual Emission: 2.73 lbs/yr
District Exemption: None

Emittant: SOX
BACT:
Cost Effectiveness: NO
Source Type: MINOR
Emis Increase: 0
Modeling: N/A
Public Notice: N/A
CONTROLLED EMISSION
Max Hourly: 0.56 lbs/hr
Max Daily: 0.56 lbs/day
UNCONTROLLED EMISSION
Max Hourly: 0.56 lbs/hr
Max Daily: 0.56 lbs/day
CURRENT EMISSION
BACT 30 days Avg: 0 lbs/day
Annual Emission: 7.28 lbs/yr
District Exemption: None

SUPERVISOR'S APPROVAL: _____ SUPERVISOR'S REVIEW DATE: _____

Processed By: chandrab 2/23/2011 9:59:53 AM